

1 THE NATIONAL INSTITUTE FOR OCCUPATIONAL
2 SAFETY AND HEALTH/NATIONAL PERSONAL PROTECTIVE
3 TECHNOLOGY LABORATORY (NIOSH/NPPTL) PUBLIC MEETING
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7 Thursday, September 28, 2006
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10 DISCUSS Concept Requirements for Certification of
11 Closed-Circuit Escape Respirators (CCER)

12 Docket Number NIOSH-005
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20 Commencing at 9:02 a.m. at the Colorado
21 School of Mines, Golden, Colorado.
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P R O C E E D I N G S

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2 MR. BOORD: I think if we can begin, I
3 think it is probably two minutes after 9, so I think
4 we should start with our meeting for today.

5 And just to make sure everybody is in the
6 right room, the purpose or the topic of the meeting
7 today is closed-circuit escape respirator proposed
8 concepts. And right at the beginning, we should say
9 that the concepts that are being presented are for
10 discussion purposes only and do not represent any
11 final determination of policy -- determination or
12 policy of the agency.

13 So the agenda that we have for today's
14 meeting is as illustrated on the screen, and we are
15 going to really try to stick to the agenda.

16 My name is Les Boord, and I'm the director
17 for the NIOSH National Personal Protective
18 Technology Laboratory. And as indicated on the
19 agenda, I will be doing the opening discussion and a
20 little review of the history relative to
21 closed-circuit type escape respirators.

22 And those discussions should take us

1 through approximately 10:30, or should take us up to
2 a break point, after which we will come back and get
3 into part of the technical discussions concerning
4 concepts relative to closed-circuit escape
5 respirators.

6 Those discussions should take us roughly
7 through to the lunch break. And then after lunch,
8 we will reconvene with a presentation from Frank Koh
9 from the University of Maryland. And following that
10 presentation, we will have an open period for any
11 further discussion or comments.

12 As we work our way through the agenda,
13 following each of the topics, we will have a
14 question and comment period as well.

15 For anyone who wishes to make a comment,
16 we have a microphone located in the center of the
17 room. And we would appreciate if the commenter
18 would go to the microphone, announce who they are,
19 who they represent, and then state whatever the
20 comment is.

21 Concerning some of the logistics for the
22 meeting today, okay, we have the registration table

1 and sign-in sheets outside, so I assume everybody is
2 registered at this point.

3 You should note that the meeting is being
4 recorded, so it will be transcribed, and the
5 transcription will be part of the docket that we
6 have for the closed-circuit escape respirators.

7 Presentations will be in accordance with
8 the agenda. And, as I said, excuse me, we will have
9 a question and answer period following each of the
10 presentations.

11 Also in the information packet that you
12 received when you registered, there are a few things
13 that I would like to point out.

14 First of all, certainly the agenda. But
15 there are also copies of all of the presentations
16 that we are going to go over today. So you have
17 access to follow them from the handouts. And those
18 presentations are also located on our website, so
19 you will have the ability to go in and look at them
20 from the website as well.

21 Also in the packet of information are the
22 contact, the contact -- points of contact for

1 further discussions on any of the concepts, and you
2 will also find a copy of, a draft copy of the
3 proposed concepts that we are going to talk about,
4 the technical concepts.

5 So the purpose of the meeting today is for
6 us to present concepts for closed-circuit escape
7 respirators. And embodied in those discussions, we
8 will be talking about the use of breathing and
9 metabolic simulators as test devices.

10 We will be talking about ruggedness and
11 reliability concepts as they apply to closed-circuit
12 escape respirators, talk about safety concepts and
13 requirements and concepts for eye protection,
14 activities relative to post-certification testing,
15 and then a concept for registration of
16 closed-circuit escape respirators once they are
17 deployed.

18 As I noted, the technical concepts that we
19 will be discussing, you have a copy of those in your
20 information packet, but they are also available for
21 you on our website at the address indicated on the
22 screen.

1 And before we get into the -- further into
2 the discussions, I think it's worthwhile to go
3 through a brief explanation of the terminology
4 involved, and the terminology specifically relative
5 to closed-circuit escape respirators and
6 self-contained self-rescuers.

7 And to provide that clarity, if you look
8 at the requirements that we currently have for
9 testing and certifying respirators, they are
10 identified in 42 CFR, Part 84. Subpart H of 42 CFR,
11 Part 84 is the section of the regulation that deals
12 with self-contained breathing apparatus.

13 And within the heading of self-contained
14 breathing apparatus, we have two different
15 classifications of respirators. The first one are
16 respirators that are used for entry and escape. And
17 the second classification is for escape only.

18 If you follow that tree down and go to the
19 entry and escape type respirators, you have two
20 different -- principally two different types of
21 technology that are employed. You have open-circuit
22 technologies and closed-circuit technologies.

1 If you take that over to the escape only
2 respirators, you have the same technologies
3 employed, open-circuit technologies and
4 closed-circuit technologies.

5 Within the world of closed-circuit escape
6 respirator technologies, we have a special category
7 for mining applications that are the self-contained
8 self-rescuers.

9 When we talk about the terminologies that
10 you will hear today, CCER is a closed-circuit escape
11 respirator, which is identified in Subpart H of 42
12 CFR. Self-contained self-rescuers are a
13 subcomponent of that.

14 So the technical requirements that
15 comprise our discussions are really focussed in this
16 area.

17 And, again, the purpose of the meeting and
18 the discussions that we are going to have today are
19 the discussions relative to developing concepts for
20 closed-circuit escape respirators which NIOSH is
21 doing in consultation with the Mine Safety and
22 Health Administration.

1 So we are in the process of developing
2 those proposed -- a proposed rule on the performance
3 and reliability requirements of closed-circuit
4 escape respirators.

5 The time line that we are looking at, or
6 the immediate time line is as identified here. And
7 we are having two public meetings. The first
8 meeting was held last week, September 19, in
9 Arlington, Virginia, and then obviously we have the
10 meeting today.

11 The meeting last week was attended by
12 approximately 30 participants, and then today's
13 meeting, we have a total, I think, of about 10 or 11
14 participants.

15 What we intend to do is, as a result of
16 the presentations today, as a result of the concept
17 that is posted on our website and any further
18 discussions that we may have, we will maintain an
19 open docket for you to provide written comments
20 concerning any of the discussions and proposed
21 concepts.

22 And that docket will remain open until

1 November 1. So at that time, we will then look at
2 what types of comments and go through a process of
3 addressing and reconciling the comments that are
4 submitted to the docket.

5 I would encourage you to submit in writing
6 to the docket any specific comments or questions or
7 concerns that you have relative to the concepts
8 discussed.

9 That contact information is on the screen.
10 The docket number is identified and the address to
11 submit the comments to. This information is also
12 part of the -- in the packet, the registration
13 packet that you received today.

14 So, again, the contact information for the
15 docket, the email address, and phone numbers.

16 In addition to that, we are interested in
17 having one-on-one discussions with any interested
18 parties. And to arrange for those discussions, you
19 can do that through contact with Tim, Tim Rehak.
20 And his phone number and email are on the screen and
21 also provided in the information packet.

22 The discussions that we are going to have

1 today are really one of the components of a
2 comprehensive program that NIOSH at the National
3 Personal Protective Technology has relative to
4 closed-circuit escape respirator technologies. And
5 that program provides -- is geared to provide
6 respiratory protection with increased capacity. And
7 we will talk little bit about that with some of our
8 research topics.

9 It will also aim at reducing the
10 physiological burden of escape type respirators.
11 It's geared towards improving the ruggedness and
12 durability of escape respirators and to also improve
13 the capability and provide for realistic training
14 for those who are required to use closed-circuit
15 self-contained escape respirators.

16 The NIOSH program has really five major
17 components, and those components are the new
18 technology workshops, evaluations of deployed mine
19 escape respirators, research pertinent to escape
20 respirators -- and we will talk a little bit about
21 that later.

22 Mine escape respirator training support

1 that the laboratory is providing. And then finally,
2 the new test and evaluation concepts and
3 requirements that we are talking about today. And
4 I'll speak a little bit about each of these program
5 components.

6 And the first one that we identify and is
7 quite active within the laboratory is the interest
8 in the quest to find new technologies that are
9 applicable to those types of respirators.

10 And when we talk about new technologies
11 for closed-circuit escape systems, the initial
12 thought that most people have is new technologies
13 for oxygen generation or new technologies for carbon
14 dioxide removal.

15 And these are certainly important
16 technologies and play key and major roles in
17 advancing the state of the art in these types of
18 respirators.

19 But I think that in the world of escape
20 respirators, we can't stop that new technology
21 considerations at those points. We need to be
22 looking at all of the technologies, technologies

1 that are applicable to these types of devices.

2 Carbon monoxide elimination. Technologies for
3 removing CO from the ambient air.

4 I think we need to be looking for -- at
5 the technologies for the introduction and use of new
6 material for respirator components, new materials
7 for breathing hoses, new materials for mouthpieces,
8 new metal that can be used to build the package for
9 the respirator, foil packs, for instance.

10 I think new materials technology is a ripe
11 area to improve the state of escape respirators.
12 And materials, also, for housing the chemicals, the
13 superoxide chemicals, oxygen generation chemicals
14 that are used, and also materials that can be used
15 to store and deliver the high pressure gases.

16 And I think that represents a very good
17 example. Because if you look at the technologies
18 that were available 30 years ago when closed-circuit
19 technologies in escape respirators were first
20 addressed, the primary technologies for storing high
21 pressure gases was a steel cylinder.

22 Since that time, that technology has

1 evolved to aluminum cylinders, from aluminum
2 cylinders to aluminum-lined cylinders with a
3 fiberglass overwrap. That technology evolved to
4 aluminum liners with a carbon overwrap.

5 And today we have now technologies that
6 are plastic-lined pressure vessels with a carbon
7 filament overwrap, which have the obvious advantages
8 of reducing the weight and the ultimate burden that
9 the user needs to carry around.

10 So I think materials, technologies, and
11 the applications of those new materials to escape
12 respirators is a really ripe area for consideration.

13 But, again, the quest for technology
14 doesn't stop with materials. I think we need to be
15 looking at new test technologies.

16 Again, if you go back 30 years ago when
17 closed-circuit escape respirators were first
18 introduced, there were certain test technologies for
19 monitoring the carbon dioxide levels and the oxygen
20 levels that were used during the test and evaluation
21 process.

22 Those instrumentation capabilities in test

1 technologies have changed drastically since that
2 time to the point today where we have the capability
3 for continuous monitoring of those parameters.

4 And also today, we are going to talk quite
5 a bit about the use of metabolic simulators to test
6 and simulate the physiological demands the
7 respirator sees. So the test technologies, I think,
8 are very important to consider.

9 Technologies as they apply to training
10 methods and training materials.

11 Today the world of training is
12 interactive, use of computer systems to -- as a
13 means of training. I don't think that we will ever
14 get away from the need for live training to actually
15 put the respirator on and see how it's used, but
16 certainly I think there are technologies that can be
17 used to facilitate training on a continuous basis
18 between those live training sessions.

19 And then we have technology as it applies
20 the service and maintenance aspects of the
21 respirators, indicators for showing when a
22 respirator exceeds a certain environmental stressor.

1 I think technology as it applies to the
2 service and maintenance aspects of closed-circuit
3 technologies is also an important area.

4 So what are we doing to advance the state
5 of the art in those technological areas?

6 Approximately in April of 2005, the
7 Laboratory entered into a collaborative effort with
8 the National Technology Transfer Center to conduct a
9 series of workshops to look at possibly new
10 technologies as they apply to these types of
11 systems.

12 Two of those workshops were conducted in
13 2005, one in June and one in December. And at those
14 workshops, we had presenters from various
15 industries, from various government agencies, and
16 from academia presenting concepts of technologies
17 that may be applicable.

18 A third workshop was held in July of this
19 past year, and we are in planning stages for a
20 fourth workshop to continue to look at the new
21 technologies.

22 And, again, our interest and our purpose

1 in doing this is to identify and to facilitate the
2 use of innovative and creative approaches for all
3 aspects of mine escape respiratory protection.

4 The second component of the Laboratory's
5 program for escape respirators is the long-term
6 field evaluation program, which was initiated more
7 than 20 years ago as part of the U.S. Bureau of
8 Mines.

9 That program currently looks at laboratory
10 tests to evaluate self-contained self-rescuer
11 performance. And that program certainly needs to
12 continue.

13 At the laboratory, we are looking at a
14 process to redefine the way that long-term field
15 evaluation program is conducted.

16 We are looking at the possibilities and
17 the challenges to bring a statistical significance
18 to the evaluations that we perform.

19 We are also gearing the program, the
20 long-term field evaluation program, to fit into the
21 greater picture of post-certification activities
22 that the Laboratory currently uses for other types

1 of respirators.

2 What does that mean? That means a
3 rigorous schedule of manufacturer quality site
4 audits where the Laboratory will be performing
5 annual audits for manufacturers of these types of
6 devices.

7 Also integrating the results of evaluation
8 testing into our certified product investigation
9 process, and continuing on further with even
10 additional product audits that are performed.

11 That program is being redefined into -- to
12 repackage that information in an annual report so
13 that we have an annual state of the technology for
14 closed-circuit escape respirators.

15 The next component in the laboratory's
16 program for closed-circuit escape respirators is the
17 research areas and the research topics that we are
18 pursuing.

19 And the first one I would like to talk a
20 little bit about is what we refer to as a hybrid
21 self-rescuer.

22 As you might imagine, the hybrid

1 self-rescuer combines the technologies of
2 self-contained systems with those of filtering
3 systems.

4 So the respirator operation would include
5 both the self-contained self-rescuer technologies,
6 oxygen supply and CO2 removal, oxygen supply either
7 through a chemical-based potassium superoxides,
8 through chlorate systems or through compressed
9 gases, and then CO2 elimination using chemical-based
10 systems.

11 Filter self-rescuer technology can employ
12 and could employ the traditional technologies of
13 hopcalite for CO removal or to look for new
14 technologies, new CO oxidation catalysts for CO
15 removal could also be a component of that research.

16 Obviously the advantages in looking at a
17 hybrid system that combines these technologies would
18 be the extended protective capability or capacity
19 for that type of respirator.

20 So in the beginning I mentioned that our
21 program is geared to increase the capacity, the
22 protective capacity. I think this research topic

1 actually will help us address a potential way to do
2 that.

3 Some of the challenges that are
4 anticipated in pursuing this research are the
5 challenges of sensing. When should the
6 self-contained portion of the system be used? When
7 should the filtering, carbon monoxide portions of
8 the system be used, and what should that switching
9 mechanism be?

10 So I think there are some unique
11 challenges to this type of system that are derived
12 from the very basis of combining the two
13 technologies and how those technologies are
14 ultimately used.

15 The second research topic is what is
16 referred to as a dockable self-rescuer. And the
17 concept behind this research would be to combine a
18 short duration and a long duration self-contained
19 system. The operation could be either
20 chemical-based or compressed gas systems.

21 The advantages -- the potential advantages
22 to using this dockable concept would be that it

1 would eliminate the need for multiple donnings,
2 complete donnings of a self-contained system to
3 achieve -- to achieve escape so that the user would
4 not have to remove one and put another on.

5 It would provide that -- could potentially
6 provide that extended capacity by providing a short
7 duration coupled into a longer duration. So it
8 would also potentially allow for a smaller and
9 lighter carry self-contained system.

10 The challenges -- just as with the hybrid
11 system, the challenges for this type of research are
12 right in the heart of the research itself, the
13 docking operation. How would you accomplish that
14 connection between a short -- or between two
15 systems. Okay? And the ability to do that coupling
16 in a contaminated environment without breaching the
17 breathing circuit, so to do it in an uninterrupted
18 fashion.

19 And then certainly the questions and the
20 issues of the reliability of the mechanism and the
21 simplicity of the operation.

22 So we have two research topics that are

1 being pursued as part of our program.

2 The first research area, the hybrid
3 research, hybrid self-rescuer, was actually a topic
4 that was generated through one of the earlier
5 workshops that we had through the NTTC approximately
6 a year ago.

7 In talking about the dockable scheme, a
8 potential schematic for doing that is illustrated on
9 this slide here. The schematic on the left side of
10 the screen would be for a short duration
11 closed-circuit system.

12 That perhaps is working on a pendulum type
13 of breathing circuit where the user exhales into the
14 system through the oxygen generation CO2 scrubbing
15 motor for the respirator and into a compliant
16 breathing bag.

17 And then on inhalation, draws the
18 inhalation breath from the compliant breathing bag
19 through the chemical, or through the part of the
20 system, and back directly into the inhalation side.

21 So it a pendulum system, in and out
22 through the oxygen and CO2 systems of the

1 respirator.

2 The right-hand schematic would illustrate
3 a potential coupling of a larger, let's say,
4 one-hour system into that ten-minute system whereby
5 that breathing circuit was changed from a pendulum
6 system to a loop system where the inhalation -- or
7 exhalation gas would pass through the generator and
8 scrubber into the compliant breathing bag. And then
9 on inhalation would be directed through a separate
10 route onto the inhalation side.

11 A little additional complexity added by
12 the check valves and directional valves that are
13 required to achieve that, but there are systematic
14 pros and cons to using either a pendulum system or a
15 loop-type breathing system.

16 So the Laboratory is involved and engaged
17 in advancing the research and research topics for
18 closed-circuit escape respirators.

19 The fourth element and component to the
20 Laboratory's program is the support and training
21 support that we are providing primarily in
22 collaboration with MSHA.

1 In that regard, we are working with MSHA
2 to develop -- and we have worked with MSHA in the
3 past to develop training modules on inspection,
4 care, and use of closed-circuit systems.

5 And we continue to work with MSHA on
6 adjustments and updating those training modules to
7 account for the multiple donning processes that
8 might be encountered.

9 And we continue to work with MSHA to
10 provide support in the way of materials and
11 expertise in training concepts for live training
12 using self-contained self-rescuers.

13 So the training element or the training
14 support is one of the key components of our program.

15 Finally we get to the fifth component of
16 the Laboratory's program. That's the new evaluation
17 concepts. That's reality the heart and purpose of
18 why we are here today, to talk about technological
19 concepts for the closed-circuit escape respirators.
20 That's the topic of our public meeting.

21 It is interesting to note that this is not
22 a new activity for the Laboratory. We have been

1 engaged in the process of developing and defining
2 concepts for new performance requirements. And we
3 have had previous public meetings to discuss these
4 issues. The last of those meetings was in April of
5 2003.

6 Since the time of those public meetings,
7 the Laboratory has been working on a staff level to
8 take the concepts and prepare them for a rule making
9 process for closed-circuit escape respirators.

10 In view of the incidents and the interest
11 in the closed-circuit technologies in 2006, we made
12 a decision to pull back a little bit from the rule
13 making process and to have a series of public
14 meetings to again address the technical concepts and
15 to create a dialogue with our stakeholders relative
16 to those concepts.

17 So that is the components of the program
18 that we have for closed-circuit escape respirators
19 currently at the Laboratory.

20 What I would like to do now is talk a
21 little bit about the history of the program. First
22 of all, any questions on the Laboratory's program

1 the activities that we are doing, or any of the
2 logistics relative to the meeting?

3 Yes, Mike.

4 MR. KAY: Good morning. Mike Kay, Ocenco,
5 Incorporated.

6 Les, I have got a question regarding the
7 2003 concepts.

8 The meetings, the 19th meeting, the
9 meeting today, we are discussing CCERs, which is a
10 broad group of mining and nonmining apparatus.

11 Most CCERs are used in a nonmining
12 environment.

13 The discussions in 2003 and at this
14 meeting and the last meeting really kind of focused
15 on SCSRs, on the problems experienced with SCSRs in
16 the mining environment.

17 I'm just wondering why the expansion from
18 a real focused discussion on SCSRs has now expanded
19 to CCERs.

20 And the point is, I think by having a
21 narrow focus, I think we can do a better job at
22 correcting some of the deficiencies or some of the

1 areas where degradation and performance issues
2 aren't being picked up in the current regulations.

3 Thank you.

4 MR. BOORD: A good comment.

5 And I think that even the previous
6 meetings, when we talked about closed-circuit escape
7 respirators in 2003 -- and maybe it wasn't conveyed
8 as thoroughly as perhaps it should have been -- but
9 even at those discussions, we were talking about
10 that part of Subpart H that applies to
11 closed-circuit escape respirators.

12 So the process and the direction has
13 always been that total picture. Okay.

14 There's certainly -- you make a very good
15 point. There's certainly a lot of specific issues
16 and interests relative to the mining sector today,
17 okay, because of all of the experiences of this
18 year.

19 And hopefully our process and the
20 continued dialogue that we have can highlight those
21 issues and focus on them and address them.

22 But the concept has always been to look at

1 that total requirement for closed-circuit escape
2 respirators.

3 And some of these issues, while they may
4 be very specific because of the rigors of the mining
5 industry, I think the deployment issues and the
6 environmental stresses and strains, they are not
7 totally unique to the mining sector.

8 There are other industries and other
9 applications I think that they do have, you know,
10 similar stressors.

11 Perhaps the mining is a little --
12 certainly has special considerations.

13 Any other questions?

14 In the world of self-contained
15 self-rescuers, the history for these types of
16 devices really goes back to the pre1981 time frame
17 when filter self-rescuers, which are principally
18 illustrated in the photo here, when filter
19 self-rescuers were the primary device that the
20 miners used.

21 In the period preceding 1981, the late
22 '70s, the real ground breaking research for

1 applications of closed-circuit technologies to
2 escape respirators was performed.

3 That research looked at a lot of the
4 issues relative to physiological considerations for
5 oxygen consumption, the CO2 elimination
6 requirements, the relationships, the RQ values
7 between the O2 and CO2 production and how you apply
8 those to designing and developing a closed-circuit
9 system.

10 That research was conducted primarily at
11 the University of Pennsylvania in the physiology
12 labs with Dr. Eliza Kamon and sponsored by the U.S.
13 Bureau of Mines.

14 It is also interesting to note that during
15 that period, there were quite a few research
16 endeavors looking to develop closed-circuit systems
17 for escape purposes that were for U.S. Navy
18 applications.

19 Okay. Those research activities also
20 spread into the same types of applications of the
21 technology for mine escape purposes. So that
22 research was really done prior to 1981.

1 In 1981, we see the introduction of first
2 generation of self-contained self-rescuers. And
3 those were done by a joint certification, NIOSH/MSHA
4 certification under the existing schedule at the
5 time, which was 30 CFR Part 11, and the MSHA
6 provisions for allowing the use of these devices in
7 mines.

8 That typical first generation type
9 self-contained self-rescuer is illustrated on the
10 right side of the photo.

11 So with the introduction of the
12 self-contained technologies to the mining industry
13 and other applications, the long-term field
14 evaluation was a program was established in 1983.
15 It was established that the time by the U.S. Bureau
16 of Mines, and it was geared for testing and
17 evaluating 50 self-contained self-rescuers per year.

18 In 1989, the technology moved and evolved
19 to what we refer to as the second generation of
20 self-contained self-rescuers.

21 And, again, when you think about the
22 applications of new technologies, this is again

1 applying those technologies to this type of a device
2 to achieve improvements in the equipment.

3 And that was done, okay, with a second
4 generation of perhaps smaller and lighter
5 self-contained self-rescuers, that may be typically
6 illustrated by the center device, the device in the
7 center of the photo.

8 So we had this second generation of
9 equipment being introduced.

10 In 2001 -- and during that period, also,
11 it's interesting to note that the U.S. Bureau of
12 Mines was kind of transitioned into NIOSH.

13 In 2001, the National Personal Protective
14 Technology Laboratory was established, and the
15 laboratory is located in Pittsburgh.

16 And at that time, the long-term field
17 evaluation program established by the U.S. Bureau of
18 Mines and transitioned into NIOSH with the
19 Pittsburgh research laboratory was then again
20 transitioned into the Personal Protective Technology
21 Laboratory.

22 The reason for that is because it just

1 fits there because NPPTL is geared for personal
2 protective technologies that holds and is the center
3 for the respirator certification program for NIOSH.
4 So the long-term field evaluation is a good fit for
5 the laboratory.

6 And at that time, the program expanded to
7 encompass a approximately 200 self-contained
8 self-rescuers. The long-term field evaluation
9 program expanded to 200 self-contained self-rescuers
10 per phase.

11 In 2003, I mentioned the meetings that we
12 had to discuss concepts for new self-contained
13 self-rescuer, or closed-circuit escape respirator
14 requirements. We talked about the collaboration
15 with the NTTC for workshops to introduce new
16 technologies and the workshops that we have had and
17 the plans to continue those workshops.

18 And then we have the events of 2006, which
19 I think most people in the room are familiar with.
20 And we have the MSHA emergency temporary standard,
21 the Miner Act. And embodied in all of that is also
22 the requests for proposals for research areas in the

1 two topics that I had already described to you, the
2 dockable self-contained systems and the hybrid
3 self-contained systems.

4 So in a capsulation here, what are some of
5 the things that have been passed on through this
6 25-year history of self-contained self-rescuers?

7 I think obviously escape is a primary
8 survival strategy, when a disaster occurs, to escape
9 from the area, whether it be an mine or whether it
10 be an enclosed structure for a CBRN event.

11 That escape is a primary survival
12 strategy.

13 And when we apply that escape strategy to
14 self-contained self-rescuers, the history teaches us
15 that perhaps more than one SCSR or one CCER per
16 miner is needed for escape purposes.

17 And embodied in that is that one hour that
18 the rescuer is rated for does not mean that one hour
19 would be provided to every user under every
20 situation and that the actual time and protection
21 that the user gets from the system has a lot of
22 variables.

1 And the variables include the miner and
2 the size of the miner and the age and the physical
3 fitness, the difficulty and the physiological demand
4 that the user is required to perform while using the
5 device, and then also the training and familiarity
6 that the user has with the respirator.

7 If you look at the current NIOSH MSHA
8 approved self-contained self-rescuers, we have five
9 different units illustrated in the picture.

10 The one the left is the Ocenco EBA 6.5.
11 The next one moving in is the Draeger Oxy K-Plus.
12 We have the CSE SR100, the MSA Lifesaver 60, and
13 here we have the Ocenco M-20 self-contained
14 self-rescuer.

15 So today these are the five self-contained
16 self-rescuers that hold a current NIOSH approval,
17 joint NIOSH/MSHA approval.

18 In looking at the basic components of a
19 self-contained self-rescuer, you have basically the
20 outer case that the rescuer is housed in. You have
21 an oxygen storage system which can either be
22 chemical or compressed gas.

1 You have the breathing hose which leads
2 from the oxygen system to the user, the user
3 interface. And the user interface typically is the
4 mouth bit at the end of the breathing tube with a
5 nose clip to seal off the nose, and goggles for eye
6 protection. And the compliant breathing bag is also
7 a common component for a closed-circuit system.

8 And as we have already discussed, the
9 principal of operation for a closed-circuit system
10 can either be chemical based or compressed oxygen.

11 In the world of chemical based systems, we
12 have the potassium superoxides. We also have
13 chlorate systems that do the oxygen generation,
14 provide the oxygen generation, and we have chemical
15 based systems that can be utilized for the CO2
16 removal.

17 The second technology is the compressed
18 oxygen system whereby we utilize the compressed
19 oxygen as the supply of oxygen into the breathing
20 circuit and a separate chemical, typically lithium
21 hydroxide, that is used for CO2 removal.

22 And within those two principal systems of

1 operation, you have the two schematics that are
2 illustrated on the screen now.

3 The one on the left is a typical
4 closed-circuit chemical oxygen-based system. And on
5 this type of a system, the user exhales into the
6 breathing circuit. The exhaled breath passes
7 through a chemical bed that can be KO₂, or it can be
8 a CO₂ scrubber.

9 Passes through the chemical bed into the
10 compliant chamber, the breathing bag. And then on
11 inhalation, is drawn from the breathing bag into the
12 breathing tube and the mouth bit.

13 The system that's illustrated here would
14 be a loop system, so the inhalation side, there's a
15 series of the check valves located here. It would
16 be directed through the chemical bed into the
17 compliant system, and, then on inhalation, through a
18 directional valve here into the inhalation side of
19 the breathing circuit.

20 Typically, the systems will house a relief
21 valve. And the purpose of the relief valve is to
22 vent excess breathing gas that may be in the system

1 due to the production of the oxygen from the
2 chemical source.

3 On the right-hand side, we have a similar
4 illustration using a compressed oxygen system. And
5 if you look at the front part of this, it is
6 principally the same as the chemical-based system
7 with the exceptions that the exhaled breath is
8 passing through a chemical CO2 scrubber to eliminate
9 the CO2. The oxygen supply is then provided from a
10 compressed gas system to feed oxygen into the
11 breathing loop, and then inhalation is through the
12 directional valve and into the system.

13 Again, these systems illustrated are what
14 are referred to as a loop system, so you are passing
15 through the scrubber or the generator one time and
16 into the inhalation side, but they can also operate
17 on a pendulum system, which is in the earlier
18 schematic that I showed you where the inhalation and
19 exhalation both pass through the chemical bed.

20 The work that we have done down through
21 the years with -- in the closed-circuit
22 self-contained systems has really been done in

1 cooperation, in cooperation with our stakeholders
2 that are illustrated here, the PCOA, the NMA, the
3 United Mine Workers Union, the United Steelworkers.
4 The U.S. Navy is an important stakeholder, as well
5 as the various self-contained system respirator
6 manufacturers, CSE, Draeger, MSA, and Ocenco.

7 And it is also important to note that
8 MSHA, we work very closely with MSHA in all of the
9 areas of closed-circuit technologies, and MSHA is a
10 co-approver with NIOSH for these types of
11 respirators.

12 The long-term field evaluation program, as
13 I mentioned, that's a program that we have to look
14 at the continued performance of deployed
15 respirators. And that program has a history of, as
16 I said, dating back to 1983.

17 The illustration that we have here shows
18 what the frequency of that activity has been,
19 beginning with the first publication in 1986
20 continuing to the current Phase 8 and Phase 9
21 testing and report preparation.

22 Some of the experiences that we have had

1 through the years of the long-term field evaluation
2 are depicted in some of these photos. And if we can
3 walk through the photos.

4 On the upper left-hand corner, we have an
5 illustration that shows the type of mechanical
6 degradation or issues of mechanical integrity of the
7 various components that were comprising the
8 self-contained self-rescuer.

9 The second photo illustrates some of the
10 issues that were discovered relative to the material
11 characteristics that were utilized in the breathing
12 tubes for these types of systems.

13 The lower left-hand corner illustrates
14 issues relative to design and retention of the
15 chemical bed within the self-contained self-rescuer.
16 And the lower right-hand illustration is that of the
17 results from chemical deterioration to produce dust,
18 and then dust migrating into the breathing circuit.

19 So when we look at the first generation of
20 self-contained self-rescuers, these are some of the
21 typical types of issues that were discovered from
22 that program.

1 When we move on to the second generation
2 of self-contained self-rescuers, we have dealt with
3 issues relative to breathing bag -- or breathing
4 hose materials, issues of the mechanical integrity
5 of the overpack and the abuse that the overpack can
6 be subjected to to actually open it to the point
7 where the ambient atmosphere could migrate into the
8 system.

9 There are issues relative to chemical
10 testing and migration into the breathing system.

11 Again, the rugged use and exposures,
12 environmental stressors that the equipment sees in
13 the field is evidenced by a dent in a metal
14 canister.

15 And then again, just the overall exposure,
16 environmental exposure of this type of equipment to
17 the rigors of the use, environments for use.

18 Some of the things that have been
19 introduced as a result of these investigations are
20 the nondestructive tests or indicators that are
21 integrated into the self-contained self-rescuers,
22 some of self-contained self-rescuers.

1 Some of the units employ high temperature
2 indicators to provide the user with an indication if
3 the device has been exposed to a temperature greater
4 than the recommendations of the manufacturer.

5 There are also devices that are used at
6 the field level and at the laboratory level to
7 determine and evaluate the extent of bed
8 degradation. Some of the earlier photos showed the
9 retention system for chemicals and the issues
10 relative to chemical dusting and migration into the
11 breathing system.

12 Technologies today utilize test devices
13 that measure the extent of the degradation and make
14 a determination whether the unit is serviceable for
15 use.

16 Some of the conclusions that can be
17 derived from this long standing program is that the
18 self-contained self-rescuers, to pass their
19 inspection criteria, the inspection criteria that
20 are designed specifically for the device that is
21 being used, should provide for safe life support and
22 that, with all of the systems, there is some

1 performance degradation observed in all of the
2 devices over time from the rigors of the deployment
3 environment.

4 Again, the long-term field evaluation
5 protocol, the objective of that program is to
6 compare performance of deployed systems to new
7 systems. The method is a method that's
8 characterized by collection and inspection. So we
9 visit the mines. We collect the self-contained
10 self-rescuers. We bring them back into the
11 laboratory.

12 We replace the ones in the field. We
13 bring them back into the laboratory to perform a
14 laboratory inspection and then perform a test. And
15 the results of that then is a report that's
16 generated summarizing the results of those tests.

17 The testing that we do in the program is
18 either a testing that utilizes a metabolic simulator
19 and in some discussions human subject testing.

20 In all cases, the testing is geared at a
21 specific physiological rate, and that rate is an
22 oxygen consumption of about 1.35 liters per minute

1 and a CO2 production rate of about 1.15, which I
2 believe is about .85 to .9 respiratory quotient, and
3 a ventilation rate of 30 liters per minute and tidal
4 volume of 1.68 and frequency of 17.9.

5 So the specifics of the simulator testing
6 are identified in the tabulation. A man test is
7 employed. It's geared to generate then to duplicate
8 or to simulate that same oxygen consumption. So
9 typically a user of the device is walking on a
10 treadmill at a rate predetermined that will produce
11 an oxygen consumption of about 1.35 liters per
12 minute.

13 It's interesting to note that that testing
14 that we do, the metabolic simulator testing and the
15 man testing that's done as part of the long-term
16 field evaluation is not the same as the test that is
17 used to certify the equipment.

18 In 42 CFR, Man Test No. 4 is the basis for
19 establishing the duration or capacity of a
20 closed-circuit system.

21 That Man Test No. 4 is comprised of
22 several different activities which can include

1 walking or running on a treadmill, carrying a weight
2 over an obstruction, an overcast, pulling weights,
3 and various activities that are used during the
4 course of the test.

5 This complicated graph that we have here
6 illustrates what the physiological CO2 -- oxygen
7 demand and CO2 parameters for a user doing a Man
8 Test No. 4 may be.

9 And I know it is really difficult to see,
10 but you have this one -- this is one of the
11 handouts, it is part of the handouts in the folder.

12 And basically, I think some of the key
13 issues -- if you look along the axis here, you have
14 either the oxygen percentage, the oxygen consumption
15 from zero to three liters per minute, or it can also
16 illustrate the CO2.

17 When you look at it, the yellow part of
18 the graph is the CO2 elimination requirements, our
19 production requirements, and the green or the dark
20 part of it is the oxygen demand, the O2 requirements
21 for the user.

22 And as you go along X axis for the graph,

1 it's time dependent. And at various times, it shows
2 what the activity involved in Man Test No. 4 that is
3 being performed.

4 So if you look at some of the details
5 here, you can see that when a Man Test No. 4 is
6 started, it's actually started with a sample period.

7 So the technology that was established in
8 30 CFR and later carried into 42 CFR was that of
9 doing a grab sample.

10 So when the user starts to use the piece
11 of equipment, the first part of the activity is to
12 do a sample, and the person is standing still when
13 what happens.

14 Typically that is associated with a
15 sedentary type condition. Oxygen consumption rates
16 may vary between .35 and .5 liters per minute. So
17 you can see it has a pretty low demand more.

18 And from there we can go into some of the
19 more aggressive activities defined in 42 CFR, or in
20 Man Test No. 4. You get to the activity that's
21 climbing on a ladder at a certain speed while
22 wearing the respirator.

1 We can see that the oxygen, the O₂
2 requirement actually peaks up to about 2.7 liters
3 per minute.

4 So you can follow that trend and see that
5 it is -- that the oxygen requirements are kind of
6 demand responsive depending on the activity that's
7 being performed.

8 In the long-term field evaluation program,
9 as I mentioned, we are testing the equipment at a
10 constant rate. And that constant rate is 1.35
11 liters per minute oxygen consumption. That's
12 illustrated by this yellow constant line on the
13 curve.

14 So that gives you some relative comparison
15 between what we currently do in the long-term field
16 evaluation and the Man Test No. 4 data, parameters,
17 which are used to certify the equipment.

18 Again, the purpose of the long-term field
19 evaluation is to obtain data to compare performance
20 of deployed to new systems. Those evaluations are
21 based on the experimental protocols, not the
22 certification testing, the man tests that are in 42

1 CFR.

2 Test methods and protocols, results cannot
3 be substituted for 42 CFR. The long-term field
4 evaluation is a different type of testing regimen.

5 The process for long-term field evaluation
6 is process of discovery. The collection of the
7 respirators from the field is not based on a random
8 sample, so therefore some unique issues and problems
9 relative to how those respirators are collected.

10 The process discovers problems and can
11 identify existing problems that may have not been
12 anticipated by the standard and then integrate those
13 into continuous improvement for the systems.

14 So practical and prudence incorporated,
15 the indicators that we mentioned a little while ago
16 were one of the by-products of that.

17 I think it is important to note, though,
18 that the results of any testing do not predict a
19 successful use by anyone in an escape situation.

20 Reliability issues. Reliability issues
21 concerning the self-contained self-rescuer is will
22 the device work. And that's by-product of how has

1 it been handled.

2 Have the required inspections and
3 conditions for continued use of it been complied
4 with.

5 As I showed with some of the earlier
6 pictures, some of the exposures and abuse that the
7 systems see can be pretty extensive. How old is the
8 system? Typically the self-contained self-rescuers
9 have a time line, an expiration date.

10 Okay. Criteria for when should the SCSR
11 be removed from service and are the inspection
12 criteria the right criteria and are the people that
13 are doing those inspection criteria properly trained
14 in how to perform the inspections and then how to
15 interpret the results.

16 So some the actions that we think can be
17 derived from the long-term field evaluation are the
18 inspection of all field deployed self-contained
19 self-rescuers, to remove the systems that don't
20 conform with the inspection requirements from
21 service.

22 We feel that there is a real benefit to a

1 program for voluntary registration, and we will talk
2 a little more about that in the technical
3 discussions.

4 Training. Training cannot be
5 overemphasized. I think that the training to pull
6 in new technologies for training users on how to use
7 this type of equipment, training in the techniques
8 for multiple donnings of the equipment and live
9 training, actually putting the piece of equipment on
10 and experiencing what it is like to do a series of
11 exercises and activities while wearing the
12 respirator.

13 Training is a very important role in the
14 successful use of self-contained self- -- of any
15 respirator, and especially for self-contained
16 closed-circuit systems.

17 And as I already mentioned, the program at
18 the laboratory is to expand the long-term field
19 evaluation program, to integrate that program into
20 the other components of auditing for certified
21 products, our certified product investigation
22 program, which is an acronym is the CPIP program,

1 the frequency of manufacturer and site audits, and
2 then to have that program produce timely outputs on
3 an annual basis summarizing what the results have
4 been, and to also pull a statistical significance to
5 the results and the evaluations that are observed.

6 That concludes our little brief discussion
7 on the history and background of SCSRs.

8 Before we get into the next part, are
9 there any questions or comments relative to any of
10 that?

11 Mike?

12 MR. KAY: I have got a question.

13 MR. BOORD: Sure.

14 MR. KAY: Mike Kay, Ocenco.

15 Do you anticipate the Phase 8 and Phase 9
16 field evaluations to be released prior to the
17 November 1 deadline of the docket being closed?

18 MR. BOORD: Yes.

19 MR. KAY: So we will have time to review
20 and comment on the docket?

21 MR. BOORD: Yeah.

22 MR. KAY: Thank you.

1

2 Follow-up question. If the release is
3 delayed past November 1, will the November 1 be
4 extended?

5 MR. BOORD: That's a good point.

6 I think we would certainly be agreeable to
7 doing that.

8 Okay. What we won't want to do is we
9 really do want to encourage feedback and input on
10 the concepts that are we discussing. And if timing
11 is an issue, then the November date would be moved.

12 MR. KAY: Thank you.

13 MR. BOORD: Any other questions?

14 I think what we will do now, we are a
15 little bit ahead of schedule, but I think rather
16 than break up the technical discussion, which I
17 think we did last week and perhaps lost a little
18 continuity, why don't we take a 15-minute break, and
19 we will meet back, let's say -- it's 10 -- a couple
20 of minutes after 10. Let's say 10:20 we will
21 resume.

22 Okay. Thank you.

1 (A recess was taken.)

2 MR. REHAK: Okay. If everyone would be
3 seated, we will start up again.

4 Good morning. My name is Tim Rehak, and
5 I'm also with the National Personal Protective
6 Technology Laboratory. And along with Bob Stein, we
7 are going to go over and review our proposed
8 concepts for the certification standards of
9 closed-circuit escape respirators.

10 And as Les stated earlier, I need to
11 repeat it again, these concepts are being presented
12 for discussion purposes only and do not represent
13 any final determination or policy of the agency.

14 Okay. While the new standards will be a
15 separate subpart under 42 CFR Part 84, some of the
16 existing subparts still apply and will apply to
17 these new standards.

18 They include subparts A through E in their
19 entirety covering everything from general provision
20 to quality control.

21 Along with the entire Subpart G, which
22 covers general construction and performance

1 requirements.

2 And also paragraphs 50, 51, and 52 of
3 Subpart F which covers scope of approval,
4 atmospheric hazards, and service time.

5 Briefly, in the handouts, you have our
6 concept paper on the new certification standards,
7 and it is also listed on NPPTL's website.

8 And this is each of the sections that are
9 covered by the new concepts. And the areas I would
10 like to point out are the highlighted areas where we
11 feel there are the major differences between the
12 existing certifications and the new standards or the
13 new proposed concept standards.

14 And they are capacity tests, where we will
15 be rating on capacity of volume of oxygen in lieu of
16 duration; performance tests, where we will be
17 testing under various work rates; environmental
18 treatments will be mandated now in our proposed
19 standards; post certification testing will also be
20 mandatory; and we are looking for voluntary
21 registration.

22 We will cover these more in detail. Next

1 Bob will come up and start going through some of the
2 sections.

3 Bob.

4 MR. STEIN: Thank you, Tim.

5 My name is Bob Stein. I'm an engineer at
6 NPPTL and pleased to have this opportunity to
7 present these technical concepts for closed-circuit
8 escape respirators.

9 The information is also available on the
10 website, but we will have this overview today that
11 might generate some questions or discussions as we
12 move through this.

13 We just need to hit again a little bit on
14 this slide that you saw earlier, talking about how
15 this will fit into the overall certification
16 regulations or approval regulations for respirators.

17 Currently closed-circuit escape
18 respirators are approved. The technical
19 requirements are contained within Subpart H. This
20 covers all types of self-contained breathing
21 apparatus, both closed-circuit, open-circuit, as
22 well as escape and entry.

1 And the newly proposed standard, if you
2 will, what will be -- what will occur as a result of
3 this is that those technical requirements for
4 closed-circuit escape respirators will be brought
5 out into their own subpart, and this will be
6 highlighted in this graphic by this block down here
7 in the lower right-hand corner.

8 From a terminology standpoint, it is just
9 pointed out here that SCSRs are a type, or would be
10 covered under closed-circuit escape respirators for
11 the most part. Now, the way we know them, they are
12 covered in that section.

13 Any kind of improvement to the technical
14 requirements for any of these respirators takes a
15 lot of developmental work.

16 There has been a lot of research done
17 leading up to this point. The long-term field
18 evaluation gives invaluable experience in how you
19 might change the standard, how you might bring about
20 improvements at the time of certification that would
21 have some bearing.

22 Much is learned by looking at respirators

1 that have been deployed under actual use conditions
2 for some period of time and evaluating them.

3 This is part of the certification process
4 in a sense because it has some bearing on how it's
5 tested at the time of approval, how is it going to
6 perform in the field. And our experience in
7 certification testing also gives rise to some of
8 these improvements.

9 And also the certified product
10 investigation process or program gives a lot of
11 information for these, anything that's learned
12 through long-term field evaluation, through
13 certification testing. If there are issues as an
14 investigation is conducted, all of those details
15 that might lead to improvements in the standard are
16 revealed in some sense.

17 And when you have the opportunity go back
18 over all of this information and make some coherent
19 sense of it, you can make improvements to the
20 technical requirements for closed-circuit escape
21 respirators, in this case.

22 Or if you had that kind of information

1 available for other ones, for those as well.

2 This is a performance-based standard, as
3 it is proposed. And we want to emphasize that it is
4 performance based. However, even in the existing
5 standard, some attributes, if you will, or some
6 components are called out.

7 The systems, as we know them, we are
8 familiar with them. But we realize that with a new
9 standard, we might see new technology. One would
10 hope you would see different technology.

11 And as these things come in, if it varies
12 too far afield, it might not have the same kind
13 of -- or the standard might not have the same kind
14 of bearing on it.

15 And so therefore some components that we
16 call out or would require as it is proposed, one of
17 them being nondestructive testing to reveal any kind
18 of degradation to the unit in the field.

19 And this only called for in those
20 instances where it would be required.

21 And that you see an example in this case
22 of a Draeger self-contained self-rescuer with a

1 nondestructive test unit clipped on the back of it.
2 That's the small box with the white face on it, the
3 red and green squares the indicators where the
4 switches are.

5 And this device, once activated, the unit
6 can be shaken, and an evaluation is made to
7 determine the integrity of the chemical bed, in an
8 instance where that is appropriate.

9 This is something that would be called for
10 because any time there is chemical used in the unit,
11 degradation of that chemical can change the
12 performance characteristics of it, so we would like
13 to know ahead of time without having to open it up
14 has this occurred and so forth.

15 Along those same lines, tamper-resistant
16 or tamper-evident casing. These are one-shot
17 devices as we know them. We would expect that new
18 entries coming on after the newly released standard
19 would be the same way.

20 We would want to know has the unit been
21 tampered with in any way; has it been opened.

22 It is difficult to know that it will

1 perform as it is supposed to or as it has been
2 designed to if it has been opened perhaps ahead of
3 time allowing outside atmosphere to get into it or
4 even, in worse events, if it has been opened and
5 somehow tampered with inside.

6 In both of these situations, we would want
7 the case to be evident and reporting that this has
8 happened.

9 Eye protection, which is currently
10 included in most of them, is not mandated in the
11 current standard. It is proposed under the concept
12 that this would be -- it would be a necessary
13 inclusion.

14 You would have to include eye protection
15 as the eyes are an important route of entry for
16 contaminants.

17 In some cases where the smoke might be so
18 thick, you couldn't see very well. It would still
19 be a problem that the smoke would be irritating to
20 the eyes and just add that much more difficulty in
21 escaping as well as providing that kind of route for
22 contaminants to enter the body.

1 Attributes. In general, as Tim pointed
2 out in the earlier slide, it still needs to meet the
3 general construction requirements that are
4 established in the existing regulation. And we also
5 want to ensure that it does not constitute any
6 additional hazard in any workplace where it is
7 introduced.

8 And we will get on into that in a little
9 bit more detail as we go through the slides.

10 Instructions, again, this is something
11 that is included with the current units, but we want
12 to call out this explicitly in the proposed
13 standard. We want the units to lend themselves in
14 some way to hands-on training.

15 And service life is another thing that
16 needs to be addressed. It is called out explicitly,
17 that those pertinent facts of service life be
18 revealed to the user.

19 These would include things such as times
20 that are appropriate for use or deployment in the
21 field and any additional conditions of use,
22 inspection requirements, and so forth.

1 This is done, but it is not explicitly
2 called out in the regulation currently that it would
3 be a change under the proposed standard.

4 Now we get down to what is perhaps the
5 biggest departure from existing standards, and this
6 is the concept of using the breathing metabolic
7 simulator to evaluate the life support capacity of
8 the unit.

9 Closed-circuit breathing apparatus, in
10 order to understand how it works or think about how
11 it works, it really is, once donned, a marriage of
12 user and respirator.

13 And historically and traditionally, that's
14 how they have been evaluated. It has to be used by
15 a human subject in order to elicit whatever behavior
16 it has been designed to provide, and that behavior
17 assessed, gas concentrations, breathing resistance,
18 temperatures and so forth.

19 And up until the advent of easily
20 obtainable microcomputers and so forth, something
21 that we could drive a metabolic simulator with,
22 that's the way that was always done.

1 But with the advent of that kind of
2 technology, we have breathing and metabolic
3 simulators, something that has been brought up
4 before, in order to stand in for the human subject
5 in making a functional assessment of the breathing
6 device.

7 And this, as proposed, would be used for
8 two different types of tests. One, a capacity test,
9 and the other, a performance test. And the
10 distinction between those two will become more
11 apparent as we get into the greater details on
12 subsequent slides.

13 However, what should be pointed out is,
14 these would be at very well fixed and established
15 protocols on the breathing and metabolic simulator.

16 The human subject going through a series
17 of exercises is going to elicit certain types of
18 oxygen consumption rates that are going to feed in a
19 certain amount of carbon dioxide.

20 The simulator can be programmed to do this
21 at a rate that somewhat mimics a human subject doing
22 the same kinds of tests.

1 And one of the slides that Les had earlier
2 that showed the graph of a human subject performing
3 Man Test 4, as opposed to the flat line that the
4 breathing and metabolic simulator would do, for
5 something like the capacity test in order to
6 understand how much oxygen is contained within the
7 system and can be delivered to the user, we would be
8 doing a test like this.

9 And then in order to better establish how
10 the unit might perform when it is subjected to
11 different and varying levels of demand, a
12 performance test.

13 Throughout the proposed standard, however,
14 human subjects will not be totally left out of the
15 equation. We will still look at using human subject
16 tests for our qualitative evaluations and for
17 wearability.

18 Anything that we would ask the simulator
19 to do, in one sense of it, we would ask a human
20 subject to do, either by a constant work rate test,
21 walking on a treadmill, or a -- and the performance
22 test would also be mimicked on the treadmill, but at

1 different speeds and perhaps even elevations in
2 order to elicit the kind of work rates that we are
3 looking for.

4 The device has to work for people. It
5 cannot just work for a simulator.

6 So throughout the testing, this will be
7 established through testing with human subjects, and
8 we will also be able to evaluate the interface
9 between the unit and the human, have considerations
10 been made for, is the breathing bag well placed, hot
11 surfaces, are they in areas where they might come in
12 contact with the user, these things that are able to
13 be evaluated much more effectively by actually
14 running tests with human subjects.

15 And that will continue.

16 Under the heading of general testing
17 conditions, under the concept as proposed, there has
18 to be some established stressor level.

19 Current human subject tests are evaluated
20 periodically, not throughout the range of work rates
21 and stressors that are imposed upon the unit. And
22 so we have to have some kinds of limitations to use

1 in doing a continuous evaluation of the performance
2 of the device.

3 So what is proposed?

4 You see two different columns of numbers.
5 They are both appropriate because one establishes an
6 acceptable range of excursion throughout the
7 different types of exercises, throughout the time
8 duration of use and so forth.

9 It is proposed that, for instance, the
10 carbon dioxide be maintained at an average
11 concentration of less than or equal to 4 percent.
12 It is proposed that the average inhaled oxygen
13 concentration be maintained to be greater than or
14 equal to 15 percent.

15 Peak breathing pressures throughout
16 different work rates and ventilation rates, you
17 might see excursions. The limit for the excursions
18 would be expressed as minus 300 millimeters of water
19 gauge all the way up to a positive 200 millimeters
20 of water gauge on exhalation. And temperature
21 excursions over the life of the apparatus limited to
22 less than or equal to 50 degrees C.

1 These, as we measure them currently with
2 the simulator, are measured as one-minute averages
3 over the duration of any test, and that would be how
4 those numbers would be compared to these acceptable
5 excursion ranges.

6 It would be one minute averages.

7 Now, moving on into how the unit needs to
8 perform overall, however, it is not proposed that
9 they -- it would be -- any device would be permitted
10 to hover at those ranges.

11 Rather, that they would -- these
12 limitations would look something more like the
13 current standard, with average inhaled CO2 being
14 maintained at less than 1 and a half percent average
15 over the test, that average inhaled oxygen
16 concentration be maintained at least at 19.5 percent
17 greater than that.

18 Peak breathing pressures, this is
19 expressed as a swing, not to be greater than 200
20 millimeters of water gauge, and that the
21 temperatures average over the test not to exceed 43
22 degrees Centigrade.

1 Capacity test. It had been mentioned
2 earlier about one hour not being one hour for every
3 user under every circumstance. And that's fairly
4 well understood, but it continues to be a point of
5 confusion sometimes when the units are deployed.

6 It has been proposed that these devices
7 that would be approved under the concept be rated
8 somewhat differently in terms of the capacity, the
9 life sustaining capacity that they have, and that
10 being more or less in the liters of oxygen that they
11 are able to deliver the user.

12 The test will be continuously monitored
13 different from the current standard, that the tests
14 are proposed will all -- will be able to be
15 performed in one location.

16 So whether you are doing it with a
17 simulator or with a human subject, you will be able
18 to monitor it continuously. Obviously you can do
19 that with the breathing and metabolic simulator.

20 Also something that has been added is that
21 there will be breathing and metabolic simulator
22 tests after environmental treatment. So we will be

1 looking at some of the units as they come in in an
2 as-received condition, some of them after they have
3 been exposed to environmental challenges in the lab.
4 And the expectation is that the performance will be
5 the same in both cases.

6 Also, again to stress that any of the
7 human subject tests that are done on the treadmill
8 will be continuously monitored.

9 Now, there is one exception to this, and
10 the slide that explains the different capacities
11 comes afterwards. But for right now I just want to
12 point out that the highest rating, the Cap 3 rating,
13 in the case that they would be approved for mining
14 use, there would be an assessment made against the
15 existing Man Test 4 regimen that is established in
16 42 CFR 84.

17 Those tables will be still be there. Any
18 other type of self-contained breathing apparatus
19 that is submitted for approval will still be
20 evaluated against the existing technical
21 requirements in Subpart H. And in the case of a
22 co-approval, if the unit is rated at a Cap 3, it's

1 proposed that the Man Test 4 would be done on those
2 to indeed show that the life support capacity is at
3 least equivalent to those that are approved under
4 the existing regulation.

5 This is an effect of the Mining Act that
6 calls for any kind of new technology that is
7 introduced to be at least as protective as any old
8 technology that was there prior to that. And this
9 is still viewed as a kind of waterline that will
10 establish whether or not that protection is at least
11 as great as what was approved under the old
12 standard.

13 To get into the capacity test requirements
14 a little bit more deeply, now, you see the table
15 that contains the different ratings that would be
16 established under the new -- or under the newly
17 proposed technical requirements.

18 We would have -- start off with a Cap 1
19 device which would contain between 30 and 59 liters
20 of oxygen under what has been proposed.

21 Now, what you see, however, in the columns
22 that are to the right of that establish that for a

1 lower duration escape activity, which would be able
2 to be sustained by one of the lower capacity
3 devices, human physiology allows for a greater level
4 of activity on average over that shorter time than
5 it would for a longer time span.

6 So the idea here is that the lower
7 capacity devices, which it would be projected would
8 be used in short duration escape activities, do need
9 to provide oxygen and do need to be able to scrub at
10 a somewhat higher level than those that are designed
11 to allow for a longer duration activity.

12 This is a physiology limitation, not a
13 limitation of the device, and one where it is
14 proposed this way so that any device approved under
15 this would be able to sustain for the user under the
16 kind of conditions, perhaps, that you might expect
17 in a short duration escape.

18 That's one of the few parameters where you
19 can say that maybe -- I don't even want to say with
20 some certainty, but that it would be allowed for in
21 that shorter duration escape.

22 The higher ventilation rate, you see 55,

1 higher respiratory frequency at .2. And this steps
2 right down as we go.

3 A Cap 2 device would contain between --
4 roughly between 60 and 80 liters, would have be able
5 to deliver oxygen at an average rate of 2 liters a
6 minute in its capacity test being able to scrub at
7 least 1.8 liters a minute CO2.

8 Somewhat lower ventilation, somewhat lower
9 respiratory frequency, all the way up to a Cap 3,
10 which must contain or be able to deliver at least 80
11 liters to the user.

12 The average work rate in this case being
13 1.35 liters a minute of oxygen delivered, 1.15 CO2
14 scrubbed, a Ve of 30, and a respiratory frequency of
15 18 breaths per minute approximately.

16 And graphically it looks like what you see
17 below. The Cap 1 device contains this much oxygen,
18 Cap 2, you know, a greater amount, Cap 3 a greater
19 amount yet, a very simple concept.

20 The performance part of that is probably
21 the most complicated part, and I'm sure there might
22 be questions on that aspect of it.

1 Now, you say with those averages in mind
2 how could we assure, however, that the longer
3 duration device would still be able to sustain some
4 kind of short burst.

5 Obviously, any time during an escape, a
6 user might able to sustain a short burst of work at
7 a very high activity level. And so to cover that
8 issue, this is why the performance tests are
9 proposed.

10 The units would be subjected to variable
11 work rates, still being continuously monitored in an
12 as-received condition, also tested after they have
13 been subjected to environmental treatments and
14 exposures and also, in the as-received condition,
15 repeated by a human subject on a treadmill.

16 The performance test concept plays out
17 this way.

18 The unit would be subjected to a high work
19 rate for a short duration of time at the beginning
20 of its life, five minutes at a 3 liter a minute work
21 rate or oxygen uptake, with CO2 being injected at a
22 rate of 3.2 liters per minute.

1 The ventilation rate for this part or
2 portion of the test 65, the respiratory frequency
3 25.

4 And if you recall during the portion of
5 the presentation made by Les, the graph, again, that
6 expounds on what the work rates look like in Man
7 Test 4. And you saw that range, anywhere from maybe
8 about .5 or .35 liters per minute uptake all the way
9 to nearly 3 liters a minute. These are fairly well
10 representative of population at large in terms of
11 what kinds of maximum work rates they can do.

12 It's not that you can't find people that
13 can do more than that among perhaps young very fit
14 populations.

15 You might find some that are able to
16 sustain a higher VO2 than 3 liters a minute.
17 However, the population in general, there are quite
18 a few people that probably can't sustain even the 3
19 liters a minute.

20 However, this is a good average. And if
21 the unit can do this, it is going to be able to
22 provide for people demanding that kind of oxygen

1 update for that short duration or burst that might
2 be encountered.

3 The next segment of the test, expose it to
4 15 minutes at 2 liters a minute oxygen provision,
5 1.8 liters a minute CO2 scrubbing capacity at a
6 ventilation rate of 44 and a respiratory frequency
7 of 20.

8 So after a short very high or nearly peak
9 work rate, we would step it down to something that
10 is more sustainable by people. And then finally
11 tapering all the way off to a ten-minute run at a
12 half liter minute oxygen supply and a .4 liter a
13 minute CO2 injection at a respiratory -- or a
14 ventilation rate of 20 and respiratory frequency of
15 12 breaths per minute.

16 One reasonable thing or way to think about
17 this is somebody that takes very quickly with an
18 apparatus, realizes they can't sustain that work
19 rate, slows down to something that is still pretty
20 hard, and then finally slows down to the point where
21 they may be walking or standing.

22 And we don't say that this happens every

1 time, but if it were to happen, does anything
2 untoward happen with the unit. We want to be able
3 to evaluate if the unit is able to adjust to these
4 different respiratory frequencies, different
5 breathing rates, different oxygen supply demands and
6 different scrubbing demands.

7 If the unit is able to provide a greater
8 quantity of oxygen, this would be cycled again.

9 Wearability test concept, getting back to
10 the human factor.

11 We want to ensure that any of the devices
12 can be easily and quickly donned, something that
13 can't be assessed on the simulator. In many of the
14 human subject tests for this purpose, the user would
15 be going through the donning procedure.

16 We would also want to ensure that during
17 any reasonably anticipated activity, that the CCER
18 will accommodate these things, not to physically
19 harm the user, not to significantly hinder the user,
20 and that it will continue to provide an adequate and
21 uninterrupted supply of breathing gas.

22 These facets of the performance are

1 addressed in the current standard, and the series of
2 man tests that are prescribed in Subpart H, we step
3 up to a different range of human activities.

4 And Man Test 3 includes many of these
5 different postures that the breathing apparatus is
6 subjected to, while being worn by the test subject.

7 Any of these could be reasonably
8 anticipated by somebody escaping any type of
9 situation, and we again want to ensure that a user
10 that is going to tip the device over isn't going to
11 do something with the device that's going to either
12 cause them to perhaps lose their grip on the
13 mouthpiece, perhaps collapse a breathing bag,
14 anything and many things that we might not even
15 think about when we actually have a human subject
16 wear it and do these, we can see how the apparatus
17 is able to perform.

18 Is it able to continuously supply
19 breathing gas and not subject the user to any
20 additional physical harm that might be say, perhaps,
21 again, by a hot surface, any of those types things
22 that would be encountered with the breathing

1 apparatus as it is working.

2 You can, I suppose, well, since you have
3 the handouts, you don't have any difficulty going
4 down through the different activities that are
5 proposed to be used.

6 Again, this table is what is proposed.
7 And we welcome any comments on activities,
8 additional activities that perhaps would be
9 reasonably suspected during an escape to be able to
10 assure that the interface between the apparatus and
11 the human subject is adequately covered and
12 addressed.

13 The environmental treatments that we have
14 been talking about. This is, again, lessons
15 learned, research through long-term field through
16 certified product investigations, even through, in
17 some cases, the approval process.

18 What is proposed is that four units will
19 be tested for capacity and performance after they
20 have been exposed to environmental treatments. What
21 do these environmental treatments consist of?
22 Extreme temperatures, cold soak, a hot soak,

1 physical shock, and being dropped from a height of
2 approximately one meter on each axis. This would be
3 roughly belt height by a user having the unit right
4 in front of them, to fall out of their hands,
5 perhaps. One drop on each axis.

6 Also vibration, a vibration spectrum
7 that's based along MIL Spec 810. MIL Spec 810 is --
8 was designed by the Army to look at hauling
9 equipment for equipment used in over-the-road type
10 either trucks or tracked vehicles.

11 The vibration spectrum that's proposed is
12 akin to the tracked vehicle type, among the more
13 severe of the vibration spectrum.

14 And, again, we know from experience and
15 research -- and mining probably is one of the most
16 challenging environments. Again, it has been
17 pointed out already, we know that's not the only
18 place they are used. But certainly if they are up
19 to the rigors of the mining environment, they are up
20 to the rigors of most deployment places, at least
21 that we have encountered so far.

22 Additional testing. Back when the

1 opportunities were first introduced into mining, the
2 question was proposed about do they pose any
3 additional hazard when you are bringing oxygen into
4 the presence of the fuel rich environment.

5 That's a reasonable question and one that
6 was actually assessed by running many of the first
7 generation units -- actually, all of them, through
8 these kinds of hazard assessment tests where
9 situations are contrived to with be worse case.

10 And that would be, for instance, run over
11 by a tracked vehicle, going through a feeder
12 breaker, which is illustrated in this picture. And
13 that kind of orange burst back there is an ignition
14 of an oxygen self-rescuer in a feeder breaker.

15 It can occur. It has occurred in
16 relatively few numbers of instances that we have had
17 reported back from the field over the years.

18 With over 20 years of experience, there
19 have been some fires reported. And as it was
20 assessed at that time originally, the fires are not
21 unmanageable. They can be put out easily by the use
22 of water, rock dust. They are short duration. They

1 don't tend to get out of control.

2 So it's not kind of hazard that might have
3 been imagined. And certainly the experience points
4 out, it's not a common occurrence. It's not as
5 common as one might have thought as these units were
6 first introduced into fuel rich environments.

7 It's relatively well established through
8 the testing that was done that if the unit stores
9 under 200 liters of oxygen or the storage pressures
10 are no greater than 3,000 PSI, that those hazards
11 fall within the bands or bounds that were described
12 by that original testing.

13 However, it is understood that with these
14 proposed standards, we may see units that contain
15 more oxygen, that may have higher storage pressures
16 due to new technology in storage containers, any
17 number of reasons. And, again, that is not accepted
18 that these units would fall within the bounds that
19 were established during that original testing.

20 So as proposed, if we saw units that
21 contained more than 200 liters of oxygen, if they
22 had gaseous oxygen at more than 3,000 pounds per

1 square inch, they would be subjected to same types
2 of hazard evaluations that were done on all of the
3 other units, not as part of the certification
4 procedure, but that is proposed to be brought in as
5 part of the certification procedure.

6 Eye protection, which it was pointed out,
7 that's one of the attributes that is called out
8 explicitly.

9 Not only it is called out to be there, but
10 the eye protection, as proposed, would have to meet
11 these types of existing standards for dust and gas
12 under ISO -- existing ISO standards also for
13 durability. And for fogging, an EN standard. This
14 is what has been proposed, and you can see more
15 details of that as you read through it on the web.

16 Post certification testing is something
17 that's been done historically under the newly
18 proposed standard.

19 This would, again, become codified or a
20 requirement to test new and deployed apparatus for
21 capacity and performance, that any failure in the
22 performance might result in revocation of approval

1 or other remedial actions as they would be
2 appropriate.

3 The proposal is that it would continue in
4 much the same vein as it has over the years, that
5 NIOSH would replace deployed units with new ones to
6 obtain those for testing. And since that is the
7 scheme, it would also be necessary that any active
8 approvals would be maintained -- there would be some
9 supply maintained is what I'm trying to say, that we
10 would be able to purchase additional units for the
11 make up so the evaluation could continue for the
12 devices that are in the field.

13 Now, we are getting down to the last of
14 the concepts that we are going to talk about in
15 detail, and that is that of voluntary registration.

16 Tim is going to take this part of it.

17 MR. REHAK: Okay. One of our concepts is,
18 as Bob said, voluntary registration.

19 The reason why we are putting forth this
20 idea is to provide NIOSH -- and MSHA also would like
21 to have the information -- on how many of the
22 different type of units therefore out in the field

1 and where they are located at.

2 This will help us, especially in sampling,
3 with the long-term field evaluation. And it will
4 also help us with risk communication and with
5 recalls.

6 A lot of times when we have field
7 complaints or if we are contemplating a recall, one
8 of the first questions asked is how many units are
9 out there and where are they located at. And it's
10 hard for us to give a hundred percent accurate
11 answer to this.

12 The only thing that we are requiring from
13 the manufacturer as part of this voluntary
14 registration is they must provide procedures with
15 the units going out in the field and how you are to
16 register the units and the reasons behind why NIOSH
17 is looking for voluntary registration.

18 This past summer we had an Internet
19 develop an SCSR registration page to see how
20 registration would work here.

21 We are trying to make it as easy as
22 possible for the users to register since we are

1 making it voluntary. And also we started out with
2 looking at the mining industry initially because
3 they are the single largest civilian deployment of
4 closed-circuit escape respirators in the field.

5 So basically we have a database with all
6 of the existing MSHA mine IDs, the name of the mine,
7 and their location.

8 All the mine would have to do initially
9 when they first start to register is to provide who
10 the contact person is, their phone number, their
11 email address, if they have email, or how we could
12 contact them if we need to get to them.

13 But we are trying to make it as easy as
14 possible. We have pulldown menus for unit type, so
15 all the mine would have to do is click on it. They
16 wouldn't have to type in that it is an Ocenco EBA
17 6.5 or whatnot. They would have just to click.

18 Other than that, they would have to enter
19 in the serial number, and then we have pulldown
20 menus for data of manufacture and year.

21 If the mine is not listed on our database,
22 there's a pulldown menu for add a new mine where

1 they go in and they provide us the information.

2 And then also with the registration, when
3 you are removing one from the field, we are also
4 asking what's the reason behind why you are moving,
5 or, you know, whether it was -- it reached an
6 expiration date or if there was some kind of damage
7 to it or what.

8 So that way it would help us keep track of
9 the attrition rates for SCSRs. And also we may see
10 a pattern which may, you know, constitute more
11 research or investigation on our part.

12 Again, this is just a sample of the
13 spreadsheet that it will provide us. We could do
14 anything with this.

15 We could group them by, you know, how many
16 M-20s are there out in the field, or we could have
17 how many M-20s are at which mine or, you know, the
18 CSE SR100.

19 So this program that we use, it was XM.
20 It was free software that we were able to get off of
21 the internet. It will provide us and also MSHA with
22 a lot of useful information, and that's why we are

1 proposing voluntary registration.

2 And finally, how the new -- or proposed
3 standards will apply to new and previously approved
4 closed-circuit escape respirators.

5 First, manufacturers and distributors can
6 continue to sell their CCERs that are currently
7 approved for up to three years from the effective
8 date of the new standard.

9 And finally, closed-circuit escape
10 respirators with current approvals can remain in use
11 for six years after the effective date of the new
12 proposed standard.

13 That's all we have as a brief overview of
14 the concepts.

15 If anyone has any comments and questions,
16 we will entertain it now.

17 MR. KAY: I have got a few, and I will try
18 to be quick.

19 Can you explain the 30 liter per minute
20 oxygen capacity?

21 Why do you stop that at 30? Why not
22 something less than 30?

1 MR. REHAK: Which test is that?

2 MR. KAY: The capacity test, the Capacity
3 1 devices, 30 liters of oxygen up to, I believe, 59
4 liters of oxygen.

5 If you have a device that had something
6 less than 30 liters of oxygen according to the
7 proposed regulations, it would not be certified.

8 MR. STEIN: Yeah. At the use rates, I
9 think that came out to something close to 10
10 minutes, and it really doesn't preclude -- I mean,
11 that's a good area to comment on.

12 Because when you get down into shorter
13 duration escape devices, there is really no reason
14 why you couldn't. But at some level, it becomes
15 unreasonable.

16 I mean, certainly we wouldn't want to see
17 that go down to like five liters or something like
18 that because that wouldn't provide, you know, any
19 kind of reasonable escape time, not as conceived
20 anyway.

21 MR. KAY: I would say that five would be
22 low, but I could see a niche market for maybe a 20

1 liter device.

2 MR. STEIN: No argument there.

3 MR. KAY: I'm not recommending that, but
4 there could be niche markets where that would be the
5 device of choice.

6 MR. STEIN: Okay.

7 MR. KAY: The most popular, the most
8 thoroughly tested CCER in the US today has got a
9 capacity less than 30 liters of oxygen, and it has
10 saved lives. It is effective and safe.

11 MR. STEIN: Okay. Nothing in there is
12 meant to be provocative in that sense of -- that's a
13 worthwhile comment. I mean, one we receive very
14 well.

15 MR. KAY: So am I getting that the 30 may
16 be dropped down to some other --

17 MR. STEIN: Some lower level?

18 MR. KAY: Something else.

19 MR. STEIN: Yes. Yes.

20 It would have to be -- I think what we
21 would have to do, though, too, Mike, if it gets like
22 into where it looks like it's a lower band, it may

1 require rethinking whether the demand rates and so
2 forth still apply.

3 You know, but I'm thinking what you are
4 saying is that you might want to drop just that one
5 number on Capacity 1 device, perhaps, be one way to
6 look at it.

7 MR. KAY: Okay. I was just thinking about
8 KO2 units, or chemical units that have got starter
9 oxygen cylinders or a chloride candle, which are
10 known to not function.

11 Will the capacity tests and will the
12 performance tests on these devices be performed
13 without the use of starter O2 since there is --
14 historically, they do fail.

15 MR. STEIN: That's not in the proposal.

16 I think like to test them differently, if
17 it were designed that way and it had the starter, I
18 would -- it's not currently proposed that they be
19 tested in a mode other than which they were designed
20 to work.

21 But, of course, regardless of how it's
22 built, regardless of what the oxygen supply is,

1 whether it is chemical, gas, I mean, the same kinds
2 of demand limits would prevail.

3 So however it was built, it would have to
4 meet that. I don't know. Again, it is something
5 worthy of a comment.

6 MR. KAY: I'm trying to get my head around
7 the logic in testing a short duration device at
8 almost twice the work rate -- a Capacity 1 device at
9 almost twice the work rate of a Capacity 3 device.

10 Regardless of the device, the miner, the
11 sailor, whoever is using it is going to make the
12 escape he needs to make.

13 And he may make that at 1.35 liters per
14 minute, or it may be at 2 and a half. But he's not
15 going to base it on the respirator he has got on.

16 MR. STEIN: You're right.

17 The limiting factor in that is how hard a
18 person can work, and they are not -- they are not
19 conscious of that.

20 It's like how hard can I work if I ask you
21 to go as hard as you can on the treadmill. And then
22 one of the questions you might ask me, Well, for how

1 long because I want to pace myself if you are going
2 to ask me to walk, either way that goes, wanting us
3 to walk on a treadmill really fast.

4 And I say, You don't have to sustain it
5 all. Just go as hard as you can, and let's see how
6 fast you can make it go.

7 Now we turn that around and say, now it
8 has to be over ten minutes. You have got to kind of
9 reduce your pace a little bit in order to sustain
10 that.

11 So the feedback that we get I think from
12 the user community suggests that it needs to be able
13 to keep up with the physiological demand that the
14 person can provide.

15 MR. KAY: I think the performance test is
16 good challenge for that.

17 MR. STEIN: Okay.

18 MR. KAY: My concern is with how it's
19 rated as far as capacity.

20 By using your logic, an SCBA with a
21 30-minute cylinder should be tested at a higher work
22 rate than an SCBA with a 60-minute cylinder.

1 MR. STEIN: On the average, that's true.

2 On the average.

3 MR. KAY: To gauge capacity.

4 It's -- I'm applying the same logic to an
5 open-circuit device.

6 As far as I know, it's unprecedented to
7 test different duration devices at different work
8 rates. A short duration device to be tested at
9 almost twice the workload of a long duration set.

10 MR. STEIN: It's not really unprecedented
11 because the existing table in Subpart H, that Man
12 Test 4, the average oxygen consumption for like a
13 ten-minute unit is a bit higher than it is --

14 MR. KAY: It's a bit higher, but it's not
15 almost twice as high.

16 It's maybe 1 .4 or 5 -- 1.4 as opposed to
17 1.35.

18 MR. STEIN: So the general concept --

19 MR. KAY: I will agree it's a little
20 higher, but it's not approaching the extremes that
21 are proposed here.

22 MR. STEIN: But the concept is not

1 unprecedented. Perhaps the values are.

2 MR. KAY: It's unprecedented from a world
3 view.

4 I'm not aware of any international
5 standards, any European standards regarding
6 respiratory protection devices that use this concept
7 to test apparatus, to certify apparatus.

8 MR. STEIN: Indeed, again, worthy of a
9 comment.

10 MR. KAY: I think I have one other thing.

11 Just the stressor levels, the CO2 levels,
12 the breathing resistance levels, have all gone up as
13 compared to what's allowed in the current standard,
14 the current part 84.

15 MR. STEIN: Okay.

16 MR. KAY: Oxygen can go down to 15 percent
17 for an excursion. That excursion could be 20
18 minutes into the test so long as it rises to a
19 hundred percent or 80 percent later on in the test,
20 and your average is still over 19 and a half.

21 So you could have long stretches of test
22 time where you're hovering at 15 percent oxygen, 4

1 percent CO2, 500 millimeters of water peak to peak.

2 And is there any data that supports moving
3 in this direction?

4 MR. STEIN: The higher levels were derived
5 from research done at Penn State. They had looked
6 at work at what kind of, you know, tolerance limits
7 exist. So the excursion values are based upon that
8 work.

9 Then the average is more based upon like
10 the existing standard. It's more in line with what
11 the current standard is.

12 So as it is proposed, the concept behind
13 it, or the theory behind it is that the average
14 levels will keep those excursions within bounds.

15 Now, you know, if you think you have
16 scenarios where you are saying, no, it could still
17 get out of hand, I mean, we would need to examine
18 that and see how reasonable -- is it to expect that
19 those kinds of things could happen.

20 MR. KAY: And particularly when you get a
21 combination.

22 A Japanese study done in 1998 breathing 3

1 percent CO2 found that the test subjects experienced
2 severe discomfort when they were breathing, I
3 believe, a hundred millimeter water column, so well
4 below what is being proposed here as far as
5 resistance and CO2.

6 So I just ask that we all be aware of the
7 physiological stressors that were --

8 MR. STEIN: Surely. And they are not
9 decoupled in actual use.

10 As you well know, you can't decouple those
11 because like higher CO2 and perhaps higher
12 ventilation go hand in hand.

13 MR. KAY: Right. Thank you.

14 MR. BOORD: Maybe I can add to that a
15 little bit too.

16 One of the differences that we are
17 observing here in the concepts that we are
18 discussing, talking about today, is that when we
19 measure these physiological parameters during
20 testing, we are measuring them on a continuous
21 basis.

22 Under the current paradigm of 42 CFR, you

1 know, we doing the grab samples at periodic points
2 throughout the course of that test.

3 So those excursions that are between those
4 test points, we don't see today.

5 MR. KAY: They are lost.

6 MR. BOORD: So I think, you know, while
7 those excursions that we are conceptualizing may be
8 different than the numbers that you see -- that are
9 present in the tables in 42 CFR, they may actually
10 be even more conservative than what actually happens
11 because of the potential excursions.

12 So I mean that's a good point, and we
13 should, you know, take it forward for our
14 deliberation.

15 The other thing I wanted to mention is
16 that relative to the using the physiological demand
17 as a basis for doing and classifying and determining
18 the -- establishing the performance capability of a
19 respirator, that is -- that is a trend that is --
20 the international standards organization, SE 15, for
21 respiratory protection devices is actually moving in
22 that direction.

1 And what that standard is actually looking
2 at is a physiological tier that is up to -- I think
3 it's up to six different physiological stress
4 levels.

5 So while NIOSH has kind of been silent in
6 that regard in the past, I think that that is -- the
7 current technology is going in that direction.

8 So, again, I think that's a good point
9 that we need to factor into our considerations. And
10 it is one of the trends that we do observe in the
11 industry.

12 MR. KAY: Thank you.

13 MR. KOH: Frank Koh, University of
14 Maryland College Park.

15 I just have a quick, quick question. I
16 really don't know much about mines and stuff, but
17 one likelihood that it floods, I notice that the
18 potassium superoxide interacts exothermically with
19 the water.

20 Can those units explode? Or are they --
21 do they have -- in the case that the seal is broken
22 or something like that, do they act vigorously or --

1 just curious.

2 MR. STEIN: It could act vigorously, yeah,
3 if you dump that much into water at one time.

4 But it seems like, you know, a couple of
5 factors work against that.

6 I mean, in once sense, if you encounter an
7 inundation, the likelihood that anybody would be in
8 near proximity to it is probably pretty low, you
9 know, when you have that much water.

10 But in order for it to be exposed that
11 quickly, you would have to simultaneously have a
12 breach of the containment.

13 So, you know, it's kind of an unlikely
14 combination of events. And, you know, the explosion
15 part of it, is certainly something I have never
16 heard of reported, you know, never seen evidence to
17 that severe of a reaction.

18 MR. KAY: I read in the Kursk incident,
19 the Russian sub that went down, they had KO2
20 apparatus. It wasn't the water. It was the oily
21 film on top of the water that ignited. One the guys
22 died of CO poisoning because they were involved in

1 the fire because of the KO2 igniting when it hit the
2 oily water.

3 MR. STEIN: Why did the KO hit the water?

4 MR. KAY: They had activated the devices
5 and were hanging them up trying to clean up the air
6 because they had high CO2 and low oxygen, and they
7 were trying to get a passive scrubber situation
8 going. And they suspect that the devices were
9 dropped into this oily water and ignited.

10 They found recovered bodies with third and
11 second degree burns on their backs like they were
12 trying to escape the flames.

13 MR. STEIN: Duck below?

14 Again, as you would know, trying to use it
15 that way, I mean, that's kind of like a training
16 issue. I think, too, to explain to people that a
17 use like that is not going to be helpful.

18 And certainly from the lesson learned
19 there, that it could even prove to be a problem, in
20 particular if you had something like an oil film on
21 the water.

22 MR. BOORD: I think also, to even add to

1 that, I think it also demonstrates the need and the
2 importance for the integrity of the packaged unit.

3 Okay. When we talk about the
4 environmental exposures, the shock, the vibration,
5 the dropping and so on, those are important from the
6 aspect of the mechanical integrity of the system
7 and, you know, that you don't damage one of the
8 components that needs to function.

9 But it's also important that you don't
10 break it open and expose the internal components to
11 whatever is in the atmosphere, water, oil mist,
12 because these can be potential reactions.

13 So the packaging and the environmental
14 stresses that it can withstand are important aspects
15 to these closed-circuit -- especially the
16 chemical-based closed-circuit systems.

17 MR. KOH: Just curious, what pressures can
18 these canisters sustain?

19 MR. BOORD: That's a good question. That
20 means I don't know.

21 MR. STEIN: Okay, thank you.

22 MR. BOORD: Any other questions?

1 Comments?

2 Okay. I think what we will do now is
3 maybe take our lunch break. I think we are running
4 a little ahead on the agenda.

5 But rather than rush through the next
6 presentation, what I think would be best is if we
7 take the lunch break.

8 And let's allow, let's say, an hour and
9 ten minutes. So if we can resume at -- my watch is
10 still on Eastern time, but I think it is 11:20.

11 So let's return at 12:30 and continue with
12 the presentations and further discussion.

13 Thank you.

14 (A luncheon recess was taken.)

15 MR. REHAK: I would like to introduce
16 Frank Koh who is from the University of Maryland
17 faculty research assistant, who works with Art
18 Johnson at the University of Maryland.

19 And Frank is here today to present a piece
20 of work that they have been undertaking and to
21 inform us on that.

22 Frank.

1 MR. KOH: Yes. Let me just grab a few
2 more things. Okay. Thank you.

3 Okay. First of all, I would like to say
4 that I'm very much humbled by some of the experts in
5 here, and I hope that the presentation goes
6 smoothly.

7 And I want to firstly apologize for
8 wearing white socks in case you guys noticed. My
9 luggage got lost, and so that's the excuse. I'm
10 holding to that one.

11 Tim was over there saying, You wore white
12 socks. So I had to make sure, the color of my
13 socks. There is an excuse. My luggage got lost.

14 Let me go ahead and start with the
15 presentation.

16 In our lab, we normally test individuals
17 with respirators, and we are trying to figure out
18 what kind of effects that has on the human person
19 wearing the respirator.

20 And about two years ago, a question came
21 up: I wonder how long -- not the length of time,
22 but what the distance an individual can walk wearing

1 one or those CSE SR100 units.

2 So that was one question that we asked.

3 The other one was, What would happen if
4 the individual was to work at a rate that's a lot
5 higher than self-paced rate.

6 So those are the two questions that arised
7 about two years ago.

8 So let's start with the PowerPoint. So,
9 as all of you guys already know, the self-rescuers
10 provide about 60 minutes of oxygen. I think the
11 SR100s themselves produce about a hundred liters of
12 oxygen.

13 And as all of this -- the chemical
14 reactions have been already talked about. I just
15 want to say that the chemical reaction itself is an
16 exothermic reaction, and it produces a lot of water
17 molecules. So we will talk a lot more about that
18 later on.

19 And, as you can imagine, as it was stated
20 many, many times already, the SCSRs work best when
21 you work at a rate -- or you work at a rate where
22 the oxygen demand equals oxygen supplied by the

1 units themselves.

2 So what happens at high work rate? You
3 can imagine that the air you breathe in would be
4 disproportionately wasted into the atmosphere, and
5 the units probably will not last as long.

6 And the other question that you want to
7 find out was how long a distance can an individual
8 walk while wearing one of these rescuers.

9 On the average, what we found was about
10 3.7 miles.

11 Let me just go ahead into the next slide.
12 And the other question, again, was at high work
13 rate, what would happen.

14 So I go will go ahead and discuss this at
15 a later slide, but you can imagine your performance
16 time drops tremendously.

17 Again, I think this has been said before,
18 so I will skip to the next one.

19 So we have a total of 14 volunteers,
20 hesitant volunteers, I might add, from the
21 University of Maryland student body.

22 And they were given health assessment

1 tests to make sure that they are able to test in our
2 lab and not just have some trouble.

3 And each of the individuals' maximum
4 oxygen consumption was roughly in the range of 2.7
5 to 3.3 liters per minute.

6 This was basically a treadmill test. The
7 individual was required to walk initially at 3 miles
8 per hour at zero percent grade, and they were
9 allowed to adjust the speed accordingly. And they
10 were asked to basically walk as long as they can.

11 Here's an example of one subject, and
12 there's a little picture of the SR100.

13 So on the distance side, some individuals
14 were able to walk as long as 5.7 miles, and some
15 were only able to walk 1.3 miles.

16 I'll go into more of the details a little
17 later. So on the average, it was 3.7 miles.

18 The times ranged, again, as well. Some
19 were able to walk for 94 minutes at their own pace,
20 and there was one individual who actually could only
21 walk for 30 minutes.

22 So looking at this chart, this is just a

1 quick summary of all of the individuals' time and
2 distance.

3 Looking at that subject who ran 30 minutes
4 for a distance of -- not ran. I should say walk. I
5 apologize -- walk for 30 minutes for a distance of
6 1.3 miles, you can see -- we wanted to see what
7 would happen if that person was given the
8 opportunity to retest.

9 So what we found was that that person was
10 actually able to increase their distance and walk
11 for a total of 48 minutes. The distance, I think,
12 was 2.3 miles. They were able to increase up to 2.3
13 miles.

14 In that regards, it kind of shows you that
15 a slight training effect might be a part of this
16 thing.

17 So we go to the next slide.

18 So, let's see. Contrary to popular
19 belief, we found that there was no correlation to
20 the individual's weight and speed. And there was no
21 correlation between speed and distance. And there
22 was no correlation between the weight and distance

1 as well.

2 This is just a quick bar graph of a time
3 frame of an individual who ran about 68 minutes.

4 You can see initially the treadmill starts
5 at 3, and that they hike it up to about 3.5. And
6 then, as you can see, as the SEA unit themselves
7 starts becoming harder to breathe, they slow down
8 their own pace.

9 Here's another example of another person
10 who walked for about 69 minutes. Again, you can see
11 that they were able to slow down their speed to
12 adjust for how much oxygen was being produced by the
13 unit.

14 So here are some of the major complaints
15 that we got from the SR100s.

16 As we talked about before, it's an
17 exothermic thermic reaction, so the units themselves
18 get very, very hot.

19 The individuals -- actually, we have to
20 have them wear a towel, or put a towel in front of
21 the subject because the units were so hot that it
22 was burning some of the subjects.

1 And a lot of the inhaled air was very,
2 very hot and humid. And so some of those subjects
3 couldn't tolerate that at all.

4 Additionally, people complained of
5 inhaling a gritty material, and there is also a high
6 resistance towards the end of testing.

7 And especially what we found was that
8 those noseclips are not so good for individuals who
9 have small noses. We had some individuals of Asian
10 descent in that, and those kept sliding right out.

11 And the mouthpiece is very, very
12 uncomfortable. You can imagine with that mouthpiece
13 in your mouth, you can't swallow your own saliva, so
14 you can just imagine yourself drooling all the way
15 down the tube. That's one of the number one
16 complaints.

17 The other thing is that the mouthpieces
18 themselves sort of dug into the gums of the
19 individuals. That was a major problem for a lot of
20 the subjects.

21 So in conclusion, as things were already
22 implemented in this regards, the SCSRs should be

1 stationed at specific locations so that it allows an
2 individual to escape a dangerous situation.

3 And perhaps additional self-rescuers is
4 available at the beginning of an escape situation.

5 So, let's see. In general, as we saw with
6 that one individual, training is very, very
7 important. And knowing some of the limitations as
8 well as all of the complaints may help that
9 individual be more comfortable.

10 And, as we found out from our own
11 subjects, just being familiar with the unit would
12 also increase usage time of the unit.

13 So the next study that we did was to
14 determine how an individual would be affected if the
15 speed was not controlled.

16 So they were forced to work at a higher
17 work rate.

18 We had one volunteer for this, and this is
19 her maximum oxygen consumption at three liters per
20 minute. And she was forced to walk at a speed to
21 solicit 65, 70, 75, 80, and 85 percent of her
22 maximum oxygen consumption.

1 She was also instructed to try to go as
2 long as she can.

3 So as you might imagine, the performance
4 time decreased linearly as oxygen consumption
5 increased, and none of the performance times reached
6 60 minutes.

7 And at all of the workloads that we did,
8 the SCSRs was not able to supply enough oxygen for
9 that person. So the main reason for termination was
10 not enough oxygen.

11 Here you can see the inverse relationship
12 of performance time to workload. And the rating of
13 perceived exertion is a scale from zero to 20, 20
14 being very, very, very hard to zero being pretty
15 comfortable. And those are the rating perceived
16 exertion of a person walking for six minutes into an
17 exerciser.

18 So you can see that they started at 13,
19 and then at 20, at termination, they pretty much
20 say, Hey, I can't do this. This is too hard for me.

21 The breathing apparatus comfort scale, a
22 scale from zero to five, zero meaning this is

1 terrible. I can't wear it anymore. And five is
2 pretty comfortable.

3 So you can see, again, in six minutes in,
4 they felt it was pretty comfortable. And then near
5 the termination, they felt that it was very, very
6 uncomfortable.

7 So in order to test what would happen if
8 there was no self-rescuer, what would happen, we
9 actually used the Kamon formula to derive what kind
10 of penalties would occur.

11 So from this equation, we were able to
12 derive this equation here. That's the penalty that
13 you would suffer from wearing the SR100.

14 So the individual, that curve -- I think
15 the slope is pretty much the same, but the pink
16 dots, that's the formula that we used to extrapolate
17 that. So essentially the shift is the penalty that
18 we pay for wearing the SR100.

19 So in respect to discussion, if you panic,
20 your work rate increases.

21 And, again, if you work at a higher rate
22 than you are supposed to, you may feel very

1 uncomfortable with the unit really, really quickly.
2 And there will be less oxygen for you to use, so
3 performance time will decrease really, really
4 quickly.

5 So essentially the units should be used at
6 low rates.

7 So in conclusion, there is an inverse
8 relationship between performance time and exercise
9 intensity, and this pretty much confirms the fact
10 that the SR100's must be used at low intensity
11 and -- or else you will pay a large penalty.

12 So overall, in the emergency situation,
13 you should not panic. And the SR100s themselves
14 should be operated at a low work rate.

15 As we saw, we saw one subject. There is
16 definitely a training effect. An individual who has
17 worn the SR100 will likely be able to walk for a
18 longer duration than a person who has just tried it
19 for the first time.

20 And as -- I guess this aspect is already
21 implemented. The SR100 should be located on
22 specific routes of escape and perhaps extra SR100s

1 should be available for escape at the beginning of
2 escape.

3 Okay. So with that, I guess questions.

4 Did I go too quickly? Wow, people are
5 still awake. That's incredible.

6 MR. BUBAN: When you said that you had a
7 disproportional amount of oxygen available to you or
8 the performance of the unit goes down when work is
9 being done, does that mean that in training
10 situations, the guys will be told not to try to
11 implement their own self-rescue?

12 MR. KOH: No. I think basically if you
13 are working at a high rate, a lot of the air that
14 you breathe in is not being used. So when you
15 exhale, you are expelling air that could have
16 possibly been used during that time to rebreathe.

17 So that's one of the primary reasons why
18 you have to control your breathing?

19 MR. BUBAN: The extra exhale goes out. It
20 doesn't come back in the --

21 MR. KOH: Right. It doesn't come back,
22 and that's one of the reasons why the oxygen would

1 be just released into the atmosphere.

2 MR. BUBAN: Your recommendations for the
3 100 size unit, that it be carried with them and then
4 larger backs be dispersed, or the same size unit be
5 everywhere?

6 MR. KOH: I guess that depends on the
7 situation in the mine. I haven't really been given
8 that much thought about it. But as long as, you
9 know, the -- I guess it depends on the mine again.
10 They should consider that aspect, that during the
11 shift, they should have enough in there so that an
12 individual can walk out.

13 The question that arises is would you want
14 to set those up so that the person who would not be
15 able to make it can make it, or do you just use the
16 average?

17 Well, that all depends on how much do you
18 value the human life. That's something that I guess
19 in the industry you have to consider.

20 MR. KOVAC: Frank, point of note. When
21 you run the numbers on your graphs, I think you
22 project like a 12 to 13 percent penalty.

1 You illustrious predecessor, Dr. Kamon,
2 doing the same sort of things, projected a 15
3 percent penalty.

4 So you did do your numbers right.

5 MR. KOH: The question is, did I do the
6 numbers right?

7 MR. KOVAC: No. I'm just saying that you
8 did.

9 You have confirmation. The only
10 difference being that they did in-mine studies where
11 you would expect broken terrain, other factors to
12 play versus running in a laboratory on a treadmill
13 in comfortable shoes and all of that.

14 MR. KOH: I see. So thank you.

15 MR. KOVAC: So there you go. There was
16 some benefit.

17 MR. KOH: Yes, definitely.

18 Any other questions?

19 All right. Yay.

20 MR. BOORD: Okay. Thank you, Frank. That
21 was very good.

22 At this point on the agenda, we would open

1 it up to any other comments, questions, or any other
2 speakers who want to address the audience, if there
3 are any.

4 Okay. I think that brings us to our wrap
5 up.

6 And, again, what I want to stress is that
7 we have had considerable discussion today concerning
8 the concepts that we are developing for
9 closed-circuit escape systems, and these concepts
10 are presented for discussion purposes and do not
11 represent any final determination or policy of the
12 Agency.

13 We are continuing on our work to develop a
14 proposed rule, and we are doing that in consultation
15 with the Mine Safety and Health Administration.

16 In order to facilitate the discussions and
17 interact with our stakeholders, we are conducting
18 the two public meetings. The first one was last
19 week, September 19, in Arlington, Virginia. And
20 this meeting today, September 28, concludes the two
21 public meetings that we had to present the concepts
22 and to discuss them.

1 The docket that we have established will
2 remain open until November 1.

3 And in support of a comment that we had a
4 little earlier in the day from one of the
5 participants concerning the timing of November 1 and
6 the release of the long-term field evaluation Phase
7 8 and 9 reports, the November 1 date may change.

8 We may hold it open longer in order to
9 facilitate total review of those reports when they
10 are issued.

11 And we will announce that on our website.
12 So if you look to the NIOSH, NPPTL website and the
13 concept for closed-circuit escape respirators, that
14 date will be confirmed.

15 Again, the contact information for the
16 docket is the address that's on the screen, and it's
17 also in the handout that was provided with the
18 registration package.

19 In order to arrange a one-on-one
20 discussion with the team to discuss any of the
21 concepts that we have raised today and to bring up
22 new ideas, you can do that by contacting Tim at the

1 phone number or email address identified, and that
2 is also in the information packet.

3 And with that, unless anybody has a
4 comment, a question, or a statement that they want
5 to address to the audience, I think we are complete.

6 Thank you for attending.

7 (Whereupon, the proceedings in the
8 above-captioned matter were concluded at 1:00 p.m.)
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CERTIFICATE OF REPORTER

1
2 I, Joseph A. Inabnet, do hereby certify
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Joseph A. Inabnet

16 Court Reporter
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